

Proposal for *ROSAT* Observations

AO-8

Cover Page

Principal Investigator		
Department		
Institute		
Address / Street		City / Town
State / County	Zip / Postal Code	Country
Telephone		Fax

E-mail Address	
Network (e.g. INTERNET, SPAN)	Node name & user ID (e.g. XYZ@ASTRO or ASTRO::XYZ)

Preferred Data Distribution Medium	
Subject Category	
Proposal Title	
Number of Targets (None if for funding only)	1 Total Time

Abstract

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General Form

PI
Proposal Title

Co-Investigator(s)			
First Name	Last Name	Institute	Country

Institute Endorsement	
Name of Administrator	
Administrative Authority	
Institute	
Signature:	Date:

PI Declaration	
I declare that this proposal has been submitted only to:	
Signature:	Date:

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Target Summary

PI
Proposal Title

Tar No	Target Name/ Alternate Name	R.A.	Dec	Obs Time (ksec)	Num obs	Time crit	WFC Zoom	WFC Filter ID Pcnt Int	Rem y/n

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PI

Proposal Title

[illegible]

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Target Remarks

PI

Proposal Title

Tar No	Remarks